

Cal/OSHA Alert

State recall of 3M 8000 respirator issued from stockpile

Background.

When 2009 H1N1 Influenza A virus (H1N1) was first recognized in March-April 2009, the Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH) recommended a system of controls to protect health care workers from infection, including the use of respirators at least as effective as a fit-tested N95 filtering facepiece respirator when in direct contact with a patient who is a suspect or confirmed case of H1N1. The recommendation for respirator use was reviewed in October 2009 and remains in effect at this time.

California has continued to have H1N1 cases, and some health care facilities have been unable to maintain an adequate supply of respirators. To address this problem, on October 22, 2009, respirators that had been purchased by the State to establish a stockpile to protect health care workers in the event of an influenza pandemic or other health care surge event were made available to local health departments for distribution to health care facilities. Since then the federal government has also released respirator supplies to the states.

Recall of 3M 8000 by State; Cal/OSHA warns employers that use of a respirator by an employee who cannot pass a fit test for that model is prohibited by regulation.

Recently CDPH and Cal/OSHA have become aware that the 3M 8000, a prevalent respirator model in the state and federal supply, has a low success rate in fit-testing. After further investigation, and discussions with the manufacturer and other respirator experts, CDPH has decided to withhold further shipments of this respirator and has asked local health departments to stop providing these respirators to health care facilities. CDPH is now developing procedures for the return of remaining supplies of the 8000 respirators by local health departments and health care facilities.

Fit-testing is a critical component of respirator use, since respirators protect people against inhaling infectious particles by sealing to the face, therefore forcing inhaled air to pass through the respirator filter instead of around the sides of the respirator. While Cal/OSHA is not prohibiting use of the 3M 8000 per se, it strongly recommends against using this model for prevention of aerosol transmitted disease and urges employers, if they decide to issue a respirator of this model to any employee, to assure a successful fittest with that employee. Cal/OSHA regulations require that fit-tests be conducted in accordance with established fit-test protocols which can be found in Section 5144, Appendix A.



Other models of respirators continue to be issued from local, state and federal stockpiles.

Health facilities are urged to utilize other respirators for employee protection, and CDPH will provide other brands and models of respirators to local health departments upon request.

At this time, even with the CDPH's recall of the 3M 8000 respirator, there are respirators available from local, state, and federal stockpiles to enable health care employers to comply with California's Aerosol Transmissible Diseases standard (8 CCR Section 5199). This includes respirator use by any employee in a health care facility, service or operation who has direct contact with a patient who is a suspected or confirmed case of H1N1, TB, or other disease requiring respirator use.

The state respirator supply remains under stress—employers should implement respirator conserving procedures.

The state stockpile continues at the current time to be available to relieve respirator supply gaps, but employers must continue to make every effort to obtain respirators through commercial channels. In some jurisdictions, local health departments have stockpiles of N95 respirators as well. In addition, employers should take whatever steps they can to limit employee exposures by appropriate patient identification and placement, source control measures, and use of other engineering and work practice controls that will minimize the need to use respirators to protect employees from exposure to patients with aerosol-transmissible disease.

Extended Use and Redonning.

Until there is a more reliable supply of respirators than currently exists, employers should also institute procedures for conserving respirator supplies through extended use and redonning of filtering facepiece respirators where this can be done without compromising patient and employee safety. More information on respirator use against H1N1 can be found at: http://www.dir.ca.gov/dosh/SwineFlu/Interim enforcement H1N1.pdf

Documentation.

Employers should continue to document their efforts to obtain and conserve respirators. A tool for this purpose can be found at:

http://www.dir.ca.gov/dosh/SwineFlu/H1N1_Interim_Guidance-Respiratory_Supply_Documentation.pdf

January 4, 2010